

GRIZZLIES FOOTBA YOUTH CAMP



\$35 Camp Fee Includes Shirt Copper Hills High School Football Booster

Walk-Up Registration Cash or Check (Payable to CHHS Football)

Pay at Gate - CHHS Football Field Main Entrance (5445 New Bingham Hwy, W. Jordan)

CHHS Youth Football Camp offers football education and skill enhancement for youth football players. This camp is geared towards all levels from no football experience to experienced players that want to take their game to the next level. Athletes will receive individualized attention, and learn the key aspects of their position through the same drill sets as our High School players.

> **Tuesday July 21, 2020** 5:30pm - 6:30pm Registration 6:30pm - 9:30pm Football Instruction/Drills

SEE REGISTRATION FORM

Health notice: Due to Covid-19, extra precautions will be in place. During registration, all participants are required to wear a mask and must complete the health screening process conducted by camp officials. Participants are permitted to remove masks during camp drills. Participants are required to provide their own water and sharing of water is not permitted. Hand sanitizer stations will be available during camp. Parents/spectators are asked to wear a mask and practice safe social distancing guidelines according to the Utah Department of Health. All parents/spectators will have limited access to the stadium bleachers for viewing.



2020

GRIZZLIES FOOTBALL YOUTH CAMP

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PARTICIPANT INFORMATION		
Name of Participant: M:	Age:	Grade:
City:	State:	Zip:
Name of Parent or Legal Guardian:		
Phone:	Cell:	
Email:		
In Case of Emergency, Please Notify:		
Phone:	A II	
medical, hospitalization, or any other expenses resulting fr TRANSPORTATION: I acknowledge that Jordan School D competition(s), practice(s), or program(s) as listed above a transportation for the student. I further agree to make such	istrict does not provide or spor	nsor transportation in connection with the sport(s), dent's parent or legal guardian, will be responsible to arrang
EMERGENCY TREATMENT: In case of an emergency inv	olving my child, I hereby autho	orize Jordan School District camp/clinic program staff to act ibility for all expenses, medical or otherwise that may arise
EQUAL OPPORTUNITY: Jordan School District provides provide reasonable accommodations to individuals with dis		e regardless of race, creed, gender, and will, upon request,
By signing this informed consent/waiver of liability ag agree to the terms. Parent or Legal Guardian signature		
Parent or Legal Guardian Signature	 Date	Participant Signature